Name in Full

Certificate of Death

40

Elizabeth C. Armiger

Died at Town: Lo. Marlboro County: Calvert MARYLAND

Date 1899 Month: April Day: 24 | Age Y. 38 M. D. | Native of Pr Geo. Co | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living 10

~~Husband~~ Wife of Benjamin H. Armiger

Father's Name Joshua Tippett | Mother's Name Elizabeth Lynch

Cause of Death: Primary Pulm. Tuberculosis | How long sick 3 yrs

Immediate Apnoea 22a | ~~Accident, Suicide, Homicide~~

Reported by E. N. Hutchinson

Address Lo. Marlboro Calvert Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 56668

Name in Full

Mrs Priscilla Catterton

Certificate of Death

50

Died at Town Bastow County Calvert MARYLAND

Date 1890 Month April Day 5 | Age Y. 63 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Single~~ Married | Widow ~~Widower~~ | ~~Divorced~~ Number ~~of children~~ living

~~Husband~~ Wife of Sam Catterton

~~Father's~~ Name | ~~Mother's~~ Name

Cause of Death: ~~Primary~~ Immediate Hymoridge 65

How long sick 3 days

Accident, Suicide, Homicide

Reported by W H Hutchins Undertaker

Address Adelina Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full: Sophia Johnson Coates

Certificate of Death 32

Died at Town: Solomons Island County: Calvert — MARYLAND

Date 1899 Month: 4-20 Day | Age Y. 34 M. 6 D. 10 | Native of Calvert Co | Occupation Housekeeper

~~Male~~ Female | ~~White~~ Colored | Married / ~~Single~~ | Widow / ~~Widower~~ | ~~Divorced~~ | Number of children living 5 1

~~Husband~~ Wife of James L. Coates Reg. 1520

Father's Name John Johnson | Mother's Name Fran Johnson.

Cause of Death: Primary Laceration of womb | How long sick 6 months

Immediate Blood poisoning | ~~Accident~~, Suicide, ~~Homicide~~

Reported by Edwin Jones M.D.

Address Bristol Calvert Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Name in Full

Eugene Foote

Certificate of Death

34

Died at Town: Fraziers County: Calvert MARYLAND

Date 1899 Month: Apl Day: 3 | Age Y. 2 M. 3 D. | Native of Calvert Co | Occupation —

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband / Wife of —

Father's Name Benjamin Foote

Mother's Name Sophia Johnson

Cause of Death — Primary: Croup Tb — Immediate:

How long sick 4 days

~~Accident, Suicide, Homicide~~

Reported by James L Tucker undertaker

Address Bertha

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

57

Samuel T. Gibson

Town

County

Died at Huntingtown Calvert MARYLAND

Month Day Y. M. D.

Date 1899 April 26 Age 46 — — Native of Md Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 6

Husband ~~Wife~~ of Priscilla Gibson

Father's Name Augustus Gibson

Mother's Name Wilhelmina Bolt

Cause of Death: Primary Typhoid Pneumonia. How long sick

Immediate

Accident, Suicide, Homicide

Reported by Elisp. Purdy. M.D.

Address Huntingtown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU; 65988

Name in Full

Certificate of Death

41

Andrew Gibson

Town

County

Died at Bowie Calvert MARYLAND

Date 189? Month April Day 29 | Age Y. 56 M. D. | Native of Maryland | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | Divorced

Number of children living 4

Husband of Wife Annie Mary Smith

Father's Name John Gibson

Mother's Name Priscilla Ann Gibson

Cause of Death: Primary 17

Immediate Pneumonia

How long sick 10 days

Accident, Suicide, Homicide

Reported by Dean M. King M.D.

Address Bowie Calvert Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968

Name in Full Eunice Hudgins — Certificate of Death 27

Died at Town Brook — County Calvert — MARYLAND

Date 1899 Month April Day 3 — Age Y. M. D. — Native of Calvert — Occupation Domestic

Male ~~Female~~ — White ~~Colored~~ — ~~Married~~ Single Widow ~~Widower~~ — ~~Divorced~~ — ~~Number of children living~~ 6

~~Husband~~ Wife of

Father's Name Chas. Hudgins — Mother's Name Martha Ramsey

Cause of Death — Primary Appendicitis — How long sick 6

Immediate Peritonitis — 05 — ~~Accident, Suicide,~~ Homicide

Reported by Leo. T. Jones M.D.

Address Barstow

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6908

Name in Full

Certificate of Death

29

Emelia C Ruth Ireland

Town

Died at Fishing Creek

County

Calvert

MARYLAND

Date 189 Month April Day 8

Age Y. 1. M. 6. D.

Native of Md.

~~Occupation~~

~~Male~~ Female

White ~~Colored~~

~~Married~~ Single

~~Widow~~ ~~Widower~~

Divorced

Number ~~of children living~~

~~Husband~~ Wife of

Father's Name Thos S Ireland

Mother's Name Sarah Ireland

Cause of Death: Primary Indigestion q v

Immediate Convulsions.

How long sick 1 day

Accident, Suicide, Homicide

Reported by F W Hutchins & Son Undertakers

Address Mt Harmony Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5068

Name in Full 3

Charles . W. Howe

Certificate of Death

39

Died at Town: Bowens County: Calvert MARYLAND

Date 1899 Month: April Day: 12 | Age Y. 18 M. mo D. | Native of Maryland | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of children living

Husband ~~Wife~~ of

Father's Name William M Howe

Mother's Name Ada M Patterson

Cause of Death: Primary Lagrikpe 9 — How long sick 10 days

Immediate Pneumonia — Accident, Suicide, Homicide

Reported by Isaac N. King M.D.

Address Barstow Calvert Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Eliza Locks — Certificate of Death 26

Died at Mutual (Town) Calvert (County) MARYLAND

Date 1899 Month 4 Day 2 | Age Y. 63 M. — D. — | Native of Florida Occupation Servant

~~Male~~ Female | ~~White~~ Colored | Married | ~~Widow~~ | ~~Divorced~~

~~Single~~ | ~~Widower~~ | Number of children living none

~~Husband~~ Wife of John Locks

Father's Name — Mother's Name 95

Cause of Death: Primary Pneumonia - acute — How long sick 1 week

Immediate Opthenditis — ~~Accident, Suicide, Homicide~~

Reported by Philip Brown MD

Address Mutual Calvert Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 05968

Name in Full: Alice B. McCully

Certificate of Death: 30

Died at: Town: Baltimore; County: Baltimore; MARYLAND

Date 1899: Month: April; Day: 17

Age: Y. 26; M. 11; D. 29

Native of: Colored

Occupation: Housework

Male / ~~Female~~ Female

White / ~~Colored~~ Colored

Married / ~~Single~~ / Widower / ~~Divorced~~

Number of children living: 4

~~Husband~~ / Wife of: Sam. McCully

Father's Name: Al. Hooker

Mother's Name: Mary F. Buckmaster

Cause of Death — Primary: Gastric Ulcer

How long sick: 2 yrs.

Cause of Death — Immediate: Asthenia

Accident, Suicide, Homicide:

Reported by: Geo. F. Jones

Address: Baltimore Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Alice Bertie Macully — Certificate of Death

Town — County — Calvert — MARYLAND

Died at

Date 189 9	Month Day 4-18	Y. M. D. Age 27	Native of	Occupation

~~Male~~ Female — White — ~~Colored~~ — Married — ~~Single~~ — ~~Widow~~ ~~Widower~~ — Divorced — Number of children living 4

~~Husband~~ Wife of Samuel Macully

Father's Name Wm. Alexander Hooper — Mother's Name

Cause of Death — Primary — 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Calvert Gazette

Address 4-22

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70P08

Name in Full

Wm C L. Mattingly

Certificate of Death

28

Town

Died at Leonardtown

County

Calvert

MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899 4	9	Age 52	2	10	Calvert Co	Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living 1.

Husband of ~~Wife~~ Cordelia Gray

Father's Name Frank Mattingly

Mother's Name Mary Jane Lewis.

Cause of Death — Primary: Peritonitis Acute

How long sick 2 days

Immediate: 93.

Accident, Suicide, Homicide

Reported by E Huguenin M D

Address Bristol Calvert Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Name in Full

Stockett Shepherd

Certificate of Death

33

Died at Town Chaneyville County Calvert MARYLAND

Date 189 Month April Day 1 | Age Y. 37 M. D. | Native of Calvert Co | Occupation Farmer

Male / ~~Female~~ | White / ~~Colored~~ | Married / ~~Single~~ | ~~Widow~~ / ~~Widower~~ | ~~Divorced~~ | Number of children living 3

Husband / ~~Wife~~ of Ida Wilkerson

Father's Name Samuel Shepherd | Mother's Name Phebe Childs

Cause of Death — Primary: Pneumonia — Left Lung, How long sick 8 days

Immediate: Abscess in Lung.

~~Accident, Suicide, Homicide~~

Reported by J. Mc. Chaney M.D.

Address Dunkirk

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65908

Name in full

Ida L. Sunderland

Certificate of Death

31

Died at Town Barlows County Calvert — MARYLAND

Date 189 9 Month Oct. Day 30 | Age Y. 2 M. 10 D. 9 | Native of Calvert + Child | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number ~~of children~~ living

~~Husband~~ Wife of

Father's Name Thos. Sunderland | Mother's Name Mollie M. Sunderland

Cause of Death: Primary Acute Miliary Tuberculosis 3 1/2 Weeks | How long sick

Immediate Dysentery 22 d | Accident, Suicide, Homicide

Reported by Geo. P. Jones

Address Barlows

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Eliza A Tower

Certificate of Death 35

Died at Town Lusby's County Calvert MARYLAND

Date 1899 Month April Day 12 | Age Y 72 M. D. | Native of Calvert | Occupation Housewife

~~Male~~ Female | ~~White~~ Colored | Married ~~Widow~~ Single ~~Widower~~ | ~~Buried~~ | Number of children living six

~~Husband~~ Wife of Major Tower

Father's Name Joseph Philips | Mother's Name Easter Philips

Cause of Death: Primary Remmitent Fever — How long sick 4 weeks

Immediate Inanition 13d — Accident, Suicide, Homicide

Reported by John S Dorsey M.D.

Address Buthia Calvert

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65869